2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2012
Secretary of State

DOCUMENT# N96000000847

Entity Name: CASE MANAGEMENT SOCIETY OF FLORIDA NORTHEAST FLORIDA CHAPTER, INC.

Current Principal Place of Business:

4800 DEERWOOD CAMPUS PARKWAY
BLDG 900, 5TH FLOOR
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

PO BOX 10906
JACKSONVILLE, FL 322470906

New Mailing Address:

FEI Number: 65-0544190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, DIANNE MRS.
4296 EDGEWATER CROSSING DR.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: DEB, BANNISTER MS.
Address: 4384 BATTLECREEK CT W
City-St-Zip: JACLSONVILLE, FL 32257

Title: VP
Name: TINA, LIPSCOMB MS.
Address: 10961 BURNT MILL RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: T
Name: DOTSON, SHERRY MRS.
Address: 8663 SANCHEZ RD.
City-St-Zip: JACKSONVILLE, FL 32217

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANNE MILLER RA 05/24/2012

Electronic Signature of Signing Officer or Director — Date